OFFICIAL FILE ILLINOIS COMMENCE COMMISSION

ORIGINAL

(File this application via e-docket, or if unable to do so, if with the Chief Clerk.)		ed application	
	Docket No	ICC Office Use Or	ıly
Please provide the appropriate information in the () are	reas in the heading be	elow.	
Pac-West Telecomm, Inc. :			
Application for a certificate of : local and interexchange authority : to operate as a reseller and a facilities : based carrier of telecommunications : services within the State of Illinois. :	05-06	CHIEF OLERK'S OFF.	100 F00 F00 F00 F00 F00 F00 F00 F00 F00
APPLICATION FOR CERTIFIC TELECOMMUNICATIO (Use additional sheets a	NS CARRIER	A OFFICE	\$ 12 58 P 12: 58
GENDRAL			
1. Applicant's Name(including d/b/a, if any)	FEIN#	# <u>68-0383568</u>	
Pac-West Telecomm, Inc.			
Address: Street 1776 W. March Lane, Suite 250			
City Stockton State/Zip California 95207	,		
2. Authority Requested: (Mark all that apply) X 1	3-403 Facilities Based	ł Interexchange	
_ <u>X_</u> 1	3-404 Resale of Local	and/or Interexch	ange
_ <u>X</u> 13	3-405 Facilities Based	Local	
3. Request for waivers/variances: In applications for loss Sections 13-404 or 13-405, waivers of Part 710 and or requested. In applications for interexchange service waivers of Part 710 and Part 735 are generally requesting and explain why Applicant is	of Section 735.180 of I e authority under Sec ested. Please indicat	Part 735 are gene tions 13-403 and e which waivers	
X Part 710 Uniform System of Acc	counts for Telecomn	nunications Carri	iers
X Part 735 Procedures Governing to Deposits, Termination of Directories for Local Excesstate of Illinois	Service and Issuance	e of Telephone	in the

X	_Section 735.180 Directories
$_{ m X}$	_ Other

Pac-West Telecomm, Inc. ("Pac-West") requests authorization to maintain its books and records at its principal place of business pursuant to 83 Ill. Admin. Code Part 250.

Applicant also requests a waiver of 83 Ill. Admin. Code § 725.500(o), which requires that call boxes be installed on a local exchange carrier's ("LEC") switch in order to allow a Public Safety Answering Position ("PSAP") employee to field 911 calls from that switch in the event of a trunking problem between the central office and the PSAP. This requirement is appropriate when applied to incumbent local exchange carriers, who have switching equipment installed in virtually all of their central offices. It would be technically infeasible (and logistically impossible) for a PSAP employee to field calls from Pac-West's switch in the event of a trunking problem between Applicant and the tandem through which Applicant will route 9-1-1 calls. Therefore, Pac-West requests that it be exempted from complying with this requirement. Although the call box requirement is not appropriately applied to Applicant, Applicant will ensure that it can process all emergency calls with a high degree of reliability.

- 4. For all applicants requesting local exchange authority under Section 13-404 or Section 13-405, please complete the following:
 - (a) the Standard Questions for Applicants Seeking Local Exchange Service Authority found in Appendix A of this document
 - (b) the 9-1-1 Questions for Applicants Seeking Local Exchange Service Authority found in Appendix B of this document;
 - (c) the Financial Questions for Applicants Seeking Local Exchange Service Authority found in Appendix C of this document; and
 - (d) if applicable, the Prepaid Service Questions for Applicants Seeking Local Exchange Service Authority found in Appendix D of this document.
- 5. In what area of the state does the Applicant propose to provide service?

Pac-West seeks authority to provide telecommunications service throughout the State of Illinois.

- 6. Please attach a sheet designating contact persons to work with Staff on the following:
 - a) issues related to processing this application
 - b) consumer issues
 - c) customer complaint resolution
 - d) technical and service quality issues
 - e) "tariff" and pricing issues
 - f) 9-1-1 issues
 - g) security/law enforcement

Please identify each contact person's (i) name, (ii) title, (iii) mailing address, (iv) telephone number, (v) facsimile number, and (vi) e-mail address.

Please See Exhibit A.

7.	Please check type of organization?			
	Individual	_ <u>X</u> _	Corporation	
_	Partnership	Date	corporation was formed May 15, 199	5
	_	In wh	nat state? California	
	Other (Specify)			

8. Submit a copy of articles of incorporation and a copy of certificate of authority to transact business in Illinois.

Please See Exhibit B.

9. List jurisdictions in which Applicant is offering service(s).

Arizona, California, Nevada, Oregon, Utah and Washington.

	principal in Applicant, been denied a Certificate of Service or had its spended in any jurisdiction in this or another name?
YES (Please provide de	tails) X NO
11. Have there been any comp jurisdiction?	plaints or judgements levied against the Applicant in any other
YESX_NO	
If YES, describe fully.	
12. Has Applicant provided se	ervice under any other name?
YESX_ NO	
If YES, please list	
	s books and records in Illinois?YES _XNO 83 Ill. Adm Code Part 250 needs to be requested.
MANAGERIAL	
	the applicant's managerial and technical resources and ability to be in either narrative form, resumes of key personnel, or a s.
Please See Exhibit C.	
15. List officers of Applicant.	
Henry R. Carabelli	President and Chief Executive Officer
H. Ravi Brar	Chief Financial Officer and Vice President Human Resources
Todd M. Putnam	Chief Information Officer
Michael B. Hawn	Vice President Customer Network Services
Eric E. Jacobs	Vice President and General Manager of Service Provider Sales
Peggy McGraw	Vice President Finance
John F. Sumpter	Vice President Regulatory Affairs
Robert C. Morrison	Vice President and General Counsel

	Does any officer of Applicant have an ownership or other interest in any other entity which has provided or is currently providing telecommunications services?YESXNO ES, list entity
17.	How will Applicant bill for its service(s)? (At a minimum, describe how often the Applicant will bill for service and details of the billing statement.) Pac-West will bill its customers directly through its own internal billing system. Bills are issued to customers on a monthly basis in hard copy.
18.	How does Applicant propose to handle service, billing, and repair complaints? (At a minimum, describe Applicant's internal process for complaint resolution, the complaint escalation process, the timeframe and process by which the customer is notified by Applicant that they may seek assistance from the Commission?)
	Customers with billing questions or complaints may reach Pac-West at its toll-free number at (877) 626-4325. Customers can contact representatives of the company twenty-four hours a day, seven days a week, for assistance. In the event of a billing dispute, Pac-West will perform a review of the disputed billing amount and promptly attempt to reach a settlement to the mutual satisfaction of all parties. Following a full investigation to determine whether or not the charges may have been fraudulent or improper, Pac-West may adjust the disputed bill. Applicant's repair service centers are available 24 hours a day, seven days a week to assist customers with questions or complaints.
19.	Will personnel be available at Applicant's business office during regular working hours to respond to inquiries about service or billing? X YES NO
20.	What telephone number(s) would a customer use to contact your company?
	<u>(877) 626-4325</u>
21.	Will Applicant abide by all Federal and State slamming and cramming laws pursuant to Section 13-902 of the Public Utilities Act and Section 258 of the 1996 Telecommunications Act?
	YESNO
22.	Please describe applicant's procedures to prevent slamming and cramming of customers?
	Pac-West will comply with applicable Illinois law as well as Federal Communications Commission regulations regarding how carriers may change a consumer's Primary Interexchange Carrier ("PIC"). Pac-West will follow a "zero-tolerance" slamming/cramming policy that all employees that interface with customers in the sales and ordering processes are required to execute.
23.	If granted authority to operate as a local exchange carrier, will the applicant abide by the following 83 Illinois Administrative Code Parts: 705, 710, 720, 725, 730, 732, 735, 755, 756, 757, 770, and 772?
	X YES NO (If no, please provide an explanation.)
	Applicant will abide by all of the above referenced Illinois Administrative Code Parts except those from which it seeks a waiver in this Application. (Please see response to Question 3 above.)
24.	Is Applicant aware that it must file tariffs prior to providing service in Illinois?
	X YES NO

FINANCIAL

25. Please attach evidence of Applicant's financial fitness through the submission of its most current income statement and balance sheet, or other appropriate documentation of applicant's financial resources and ability to provide service.

Pac-West's success in developing innovative products and services and in expanding its geographic reach has translated into impressive growth in recent years and as such Pac-West is extremely well-qualified financially to operate and expand the its business. In 2004, Pac-West's usage grew to 44.7 billion minutes of use generating revenue of more than \$124 million. Financial information demonstrating Pac-West's financial qualifications is provided in its most recent Form 10-K; a copy of the financial statements contained in the Form 10-K are attached hereto as Exhibit D. As shown in the attached information, Pac-West is financially qualified to operate within the State of Illinois.

TE	CHNICAL
26.	Does Applicant utilize its own equipment and/or facilities? X YES NO
If Y	(ES, please list the facilities Applicant intends to utilize. Also include evidence that Applicant possesses the necessary technical resources to deploy and maintain said facilities:
nee	evidenced by the attached managerial biographies Pac-West meets the technical requirements eded to maintain and deploy facilities. Until interconnection agreements are signed with each EC, Pac-West is unable to provide a list of facilities for intended use in Illinois.
If N	NO, which facility provider(s)'s services does the Applicant intend to use?
 27.	Please describe the nature of service to be provided (e.g., operator services, internet, debit cards, long distance service, data services, local service, prepaid local service).
into cus Pro	c-West seeks statewide authority to provide facilities-based and resold local exchange and erexchange telecommunications services. While Pac-West will offer traditional voice services to stomers utilizing the public switched network, Pac-West will also offer services using Internet otocol to provide voice and data applications that interact seamlessly with the traditional public itched network.
28.	Will technical personnel be available at all times to assist customers with service problems? XYESNO
29.	If Applicant intends to provide payphone service, will the equipment utilized comply with FCC requirements and Finding (9) of the Commission Order entered in Docket No. 84-0442 on June 11, 1986, including, but not limited to: (a) touch dialing; (b) access to 9-1-1 and "0" operator dialing without use of a coin; (c) rules governing use of payphones by disabled persons; (d) ability to complete local and long-distance calls; (e) unlimited duration for local calls; and (f) a message explaining the telephone's general operations, dialing instructions for emergency assistance, payphone owner's name, method of reporting service problems and method of receiving credit for faulty calls? YESNO
	Not applicable. (Signature of Applicant)

VERIFICATION

This application shall be verified under oath.

OATH

State of California)
County of San Joaquin)ss
John Sumpter makes oath and says that he is Vice President of Regulatory
(Insert here the name of affiant) (Insert the official title of the affiant)
of Pac-West Telecomm, Inc.
(Insert here the exact legal title or name of the Applicant)
that he has examined the foregoing application and that to the best of his knowledge, information, and belief, all statements of fact contained in the said application are true, and the said application is a correct statement of the business and affairs of the above-named applicant in respect to each and every matter set forth therein. Signature of affairs
Subscribed and sworn to (or affirmed) before me, Nancy Wong Griffin, Notary Public, on this 7th day of September, 2005 by John Sumpter, personally known to me or proved to me on the basis of satisfactory evidence to be the person who appeared before me.
WITNESS my hand and official seal. NANCY WONG GRIFFIN Commission # 1505879 Notary Public - California San Joaquin County My Comm. Expires Aug 6, 2008

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My Commission Expires: August 6, 2008